| 09    | 6 | 2 | U | 94 | 0 |
|-------|---|---|---|----|---|
| A1161 |   |   |   |    | - |

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

Charage.

| _   |   |           |                                  |                      |         |  |  |        |                    |  |         |                     |                        |
|---|---|-----------|----------------------------------|----------------------|---------|--|--|--------|--------------------|--|---------|---------------------|------------------------|
| L   |   | CL        | ((                               | S FILED<br>Column 1) | - PA    | (Colt                                      | ımn 2)                                 | •      | SMALL<br>TYPE      | ENTITY   | OR      |                     | THAN<br>ENTITY         |
| L   | OR .  |           | NUMB                             | ER FILED             |         | NUMBER                                     | EXTRA                                  |        | RATE               | FEE  | ]       | RATE                | FEE                    |
| В   | ASIC FEE  |           |                                  |                      |         |  |  |        |                    | 345.00   | OR      |                     | 690.00                 |
| ľ   | OTAL CLAIMS   |           | 11/                              | minus                | 20=     | ٠  |  |        | X\$ 9=             |  | OR      | X\$18=              |                        |
| IN  | DEPENDENT C   | LAIMS     | <u> </u>                         | minus                | 3 =     | •  |  |        | X39=               |  | OR      | X78≃                |                        |
| M   | MULTIPLE DEPENDENT CLAIM PRESENT  |           |                                  |                      |         |  |  |        | .400               | <del>                                     </del> | 1       |                     |                        |
| -   | * If the difference in column 1 is less than zero, enter "0" in column 2  |           |                                  |                      |         |  |  | •      | +130=              | Que  | OR      | +260≃ .             |                        |
|   | CLAIMS AS AMENDED - PART II   |           |                                  |                      |         |  |  |        |                    | 1242   | OR      | TOTAL               |                        |
| L   |   | (Col      | umn 1)                           |                      | (C      | OTHER SOLUTION 3) SMALL ENTITY OR SMALL    |  |        |                    |  |         |                     |                        |
| AMENDMENT A   |   | REM       | AIMS<br>IAINING<br>TER<br>IDMENT |                      | PA      | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                       |        | RATE               | ADDI-<br>TIONAL<br>FEE                           |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| ğ   | Total   | : 11      |                                  | Minus                |         | 20   | =                                      |        | X\$ 9=             |  | OR      | X\$18=              |                        |
| ¥   | Independent<br>FIRST PRESE  | NTATIC    | 3                                | Minus                |         | 3  | =                                      |        | X39=               |  | OR      | X78=                |                        |
| 卜   | THO! THESE  | NIAIR     | ON OF M                          |                      | PEND    | ENT CLAIM                                  | لـــــــــــــــــــــــــــــــــــــ |        | +130≈              |  | OR      | +260=               |                        |
| l   |   |           |                                  |                      |         |  |  | 7      | TOTAL<br>DOIT, FEE |  | OR      | TOTAL<br>ADDIT, FEE |                        |
| L   | <del></del>   |           | umn 1)<br>AIMS                   |                      |         | olumn 2)<br>(IGHEST                        | (Column 3)                             | _      |                    |  |         |                     |                        |
| AMENDMENT B   |   | REM<br>AF | AINING<br>TER<br>IDMENT          |                      | PR      | NUMBER<br>EVIOUSLY<br>VAID FOR             | PRESENT<br>EXTRA                       |        | RATE               | ADDI-<br>TIONAL<br>FEE                           |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| Į   | Total   | · -       | 1                                | Minus                |         | 20   | =                                      |        | X\$ 9=             |  | OR      | X\$18≃              |                        |
| ¥   | Independent<br>FIRST PRESE  |           | 3                                | Minus                |         | 3  | =                                      | ı      | X39=               |  | OR      | X78=                |                        |
| -   | rinal Fricac  | MAIL      |                                  | JUINCE DEI           | PEND    | ENT CLAIM                                  |  |        | +130=              |  | OR      | +260=               |                        |
|   | •   |           |                                  |                      |         |  |  | A      | TOTAL<br>ODIT. FEE |  | OR      | TOTAL<br>ADDIT, FEE |                        |
| L,  |   |           | ımn 1)                           |                      |         | olumn 2)                                   | (Column 3)                             |        |                    |  |         |                     |                        |
| AMENDMENT C   |   | REM/      | AIMS<br>AINING<br>TER<br>DMENT   |                      | PRI     | IIGHEST<br>IUMBER<br>EVIOUSLY<br>AID FOR   | PRESENT<br>EXTRA                       | ſ      | RATE               | ADDI-<br>TIONAL<br>FEE                           |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| Š   | Total   |           | 1                                | Minus                | ••      | 20   | =                                      | Γ      | X\$ 9=             |  | OR      | X\$18=              | 100                    |
| AME   | Independent   | • 7       | <u>5</u>                         | Minus                | •••     | 3  | = .                                    | 1      | X39=               |  |         | X78=                |                        |
|   | FIRST PRESE   | NTATIO    | N OF MU                          | JLTIPLE DEF          | PEND    | ENT CLAIM                                  |  | F      |                    |  | OR      |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |           |                                  |                      |         |  |  |        |                    |  | OR      | +260=               |                        |
|   | "If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR ADDIT. FEE  The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. |           |                                  |                      |         |  |  |        |                    |  |         |                     |                        |
| 1   | un unduezi yanı   | Der Prev  | lously Pak                       | or (Total or         | r Indep | endent) is the                             | highest number                         | r foun | d in the app       | ropriate box                                     | in colu | Jann 1.             |                        |

FORM PTO-875 (Rev. 12/99)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE \*U.S. GPO: 2000-463-433/29044

## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

Application or Docket Number

C1024946

| <u> </u>   |  |  |                                 |   |         |  |                  | -     |                             |                        |          | 14                           |                        |
|--|--|--|---------------------------------|---|---------|--|------------------|-------|-----------------------------|------------------------|----------|------------------------------|------------------------|
| L  |  |  |                                 | IMS AS FILED - PART I (Column 1) (Column 2) |         |  |                  |       | SMALL<br>TYPE               | ENTITY                 | OR       | OTHER                        |                        |
| FOR '  |  |  | NUMBER FILED                    |   |         | NUMBER EXTRA                                 |                  |       | RATE                        | FEE                    | ]        | RATE                         | FEE                    |
| BA   | BASIC FEE  |  |                                 |   |         |  | ·                | }     |                             | 345.00                 | OR       |                              | 690.00                 |
| TC   | TAL CLAIMS   |  | #                               | minus                                       | 20=     | •  |                  | ]     | X\$ 9=                      |                        | OR       | X\$18=                       |                        |
| ┡  | EPENDENT C   |  | *                               | minus                                       | 3 =     | <u> </u>                                     |                  |       | X39≃                        |                        | OR       | X78≃                         |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |  |                                 |   |         |  |                  |       | +130=                       |                        | OR       | +260≈ .                      |                        |
| • If the difference in column 1 is less than zero, enter "0" in column 2 |  |  |                                 |   |         |  |                  |       | TOTAL                       | 345                    | OR       | TOTAL                        |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)             |  |  |                                 |   |         |  |                  |       | SMALL                       | ENTITY                 | OR       | OTHER<br>SMALL               |                        |
| AMENDMENT &  | D  | REM.   | AIMS<br>AINING<br>TER<br>IDMENT |   | PI      | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA |       | RATE                        | ADDI-<br>TIONAL<br>FEE |          | RATE                         | ADDI-<br>TIONAL<br>FEE |
| Š  | Total  | . 1  | 4                               | Minus                                       | <u></u> | 20   | =                |       | X\$ 9=                      |                        | OR       | X\$18=                       |                        |
| AME  | Independent<br>FIRST PRESE                                     | NTATIO                                       | ά <u>.</u>                      | Minus                                       |         |  | =                |       | X39=                        |                        | OR       | X78=                         |                        |
| Т  | FINOI PRESE  | NIANO  | N OF WIL                        | JENFLE DEI                                  | EM      | ENT CLAIM                                    |                  | ۱ ۱   | +130≈                       |                        | OR       | +260≃                        |                        |
|  |  |  | •                               |   | TOTAL   |  | OR               | TOTAL |                             |                        |          |                              |                        |
| (Column 1) (Column 2) (Column 3)   |  |  |                                 |   |         |  |                  |       |                             |                        |          |                              |                        |
| AMENDMENT 8  | E  | REM.   | AIMS<br>AINING<br>TER<br>IDMENT |   | PI      | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA |       | RATE                        | ADDI-<br>TIONAL<br>FEE |          | RATE                         | ADDI-<br>TIONAL<br>FEE |
| Š  | Total  | Ŀ  |                                 | Minus                                       |         |  | =                |       | X\$ 9=                      |                        | OR       | X\$18≈                       |                        |
| AME  | Independent<br>FIRST PRESE                                     | NITATIO                                      | N OF SAL                        | Minus                                       | DENI    |  | =                | 1     | X39=                        |                        | OR       | X78=                         |                        |
| -  | THOTTICO   | ativito.                                     |                                 | JETH-LE DE                                  | LIVE    | ZENT OCAM                                    |                  | ۱ [   | +130=                       |                        | OR       | +260≈                        |                        |
|  | ·  |  |                                 |   |         |  |                  | 4     | TOTAL<br>ODIT. FEE          |                        | OR       | TOTAL<br>ADDIT. FEE          |                        |
|  |  | (Colu  | imn 1)                          |   |         | column 2)                                    | (Column 3)       |       |                             |                        |          |                              |                        |
| AMENDMENT C  | F  | REMA   | aims<br>Aining<br>Ter<br>Dment  |   | P       | HIGHEST .<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |       | RATE                        | ADDI-<br>TIONAL<br>FEE |          | RATE                         | ADDI-<br>TIONAL<br>FEE |
| NON  | Total  | <u>.                                    </u> |                                 | Minus                                       |         |  | =                |       | X\$ 9=                      |                        | OR       | X\$18≃                       |                        |
| ME   | Independent  | •  |                                 | Minus                                       |         |  | =                | lt    | X39=                        | _                      | 0.0      | X78=                         |                        |
|  | FIRST PRESE  | NTATIO                                       | N OF MI                         | JLTIPLE DEI                                 | PEN     | DENT CLAIM                                   |                  | 1     |                             |                        | OR       |                              |                        |
| ** 1   | f the entry in colu<br>f the "Highest Nu<br>If the "Highest Nu | mber Pre                                     | viously Pa                      | id For IN THI                               | S SP    | ACE is less tha                              | n 20, enter "20. |       | +130=<br>TOTAL<br>ODIT. FEE |                        | OR<br>OR | +260=<br>TOTAL<br>ADDIT. FEE |                        |
| . :  | reversigned Nu   | וויייייייייייייייייייייייייייייייייייי       | VIJUSIY P                       | MO COL IN LAI                               | - OP    | nos is less tha                              | io, einei 3.     |       |                             |                        |          |                              |                        |